PTO/SB/81A (12-08)
Approved for use through 11/30/2011. OM8 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## PATENT - POWER OF ATTORNEY Patent Number 7,470,690 Issue Date OR December 30, 2008 REVOCATION OF POWER OF ATTORNEY First Named Inventor David Cavalla WITH A NEW POWER OF ATTORNEY 4-(2-FLUOROPHENYL)-6-METHYL-2-4-(2-FLUORUPHEINIE) (1-PIPERAZINYL)THIENO(2,3-D) Title AND CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number 001112-5009

A Power of Atto	previous powers of attorney give orney is submitted herewith.		parone.		
OR I hereby appoir attorney(s) or a the United State	nt Practitioner(s) associated with the agent(s) with respect to the patent id es Patent and Trademark Office cor	nnected therewith:	d to transact all busine		
I hereby appoin above, and to tr	t Practitioner(s) named below as managed all business in the United St	y/our attorney(s) or ates Patent and Tr	r agent(s) with respect	to the patent identified	
Practitioner(s) Name			Registration Number		
ine address associ	e the correspondence address for the at ated with the above-mentioned Custome	bove-identified paten: er Number.	t to:		
OR  The address associa OR  OR  Firm or Individual Name ddress	ated with the above-mentioned Customs	pove-identified paten	t to:		
OR  The address associa OR  OR  Firm or Individual Name ddress	ated with the above-mentioned Custome	pove-identified patent er Number.	t to:	Zip	
OR  The address associa OR  Firm or Individual Name ddress  ity ountry slephone	ated with the above-mentioned Custome	er Number.	t to:	Zip	
OR  The address associa OR  The address associa OR  Firm or Individual Name ddress ity ountry elephone m the: Inventor, having owner OR Patent owner.	ated with the above-mentioned Customer sted with Customer Number:	State		Zip	
The address associated on the second on the	rship of the patent.  FR 1/3(b) (Form FTO SB/96) submitted  (SIGNATURE/of Invento	State  Email  I herewith or filed on		Zip TV ZALL	
The address associal OR  The address associal OR  Firm or Individual Name ddress ity ountry elephone  Inventor, having owner OR  Patent owner.  Statement under 37 CF	rship of the patent.  FR 1/3(b) (Form FTO SB/96) submitted  (SIGNATURE/of Invento	State  Email  I herewith or filed on or or Patent Owner		18. 20(V)	

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the uSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete uncluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.